

Indiana State  
Department of Health



*Office of Women's Health*  
Indiana State Department of Health

**Indiana State Department of Health  
Office of Women's Health**

Rape Prevention and Education Funding from  
The Department of Health and Human Services  
Public Service

Centers for Disease Control and Prevention  
National Center for Injury Prevention and Control  
Division of Violence Prevention

**Guidance, Request for Proposals, and  
Application Packet**

**Fiscal Year 2010  
(November 1, 2009-October 31, 2010)**

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### **Forms (separate documents)**

Form A—Applicant Information Form

Form B—FY 2010 Rape Prevention and Education Work Plan

**Attachments (separate documents)**

*Attachment A*—"Sexual Violence Prevention—Beginning the Dialogue"

*Attachment B*—"Second Edition: Guidance Document for the Sexual Violence Prevention and Education Cooperative Agreement" (pp 4-18)

*Attachment C*—"Draft Guidelines for Working with Youth, Families, and Communities for Sexual Violence Prevention"

*Attachment D*—"Draft Enhancing Activities for Primary Prevention of Sexual Violence"

*Attachment E*—"Guidelines for Coalition Building for Sexual Violence Prevention"

*Attachment F*—"Sexual Violence and the Spectrum of Prevention"

# **FY 2010 Indiana Rape Prevention and Education Request For Proposals Guidance**

## **1. Statement of Purpose**

The Indiana State Department of Health (ISDH), through the Office of Women's Health (OWH) in conjunction with the Center for Disease Control's National Center for Injury Prevention and Control (CDC) is pleased to announce the availability of funding to facilitate the creation, implementation, and/or continuation of Sexual Violence Primary Prevention (SVPP) programming in the state of Indiana. The Indiana State Department of Health has entered into Cooperative Agreement CE07-701 with the CDC. This partnership has developed strategies to prevent the initial perpetration and victimization of sexual violence through:

- Using a public health approach;
- Supporting comprehensive primary prevention program planning at multiple levels of the social ecological model;
- Building organizational, community, and state capacity for the primary prevention of sexual violence;
- Applying the principles of effective prevention strategies, and;
- Evaluating SVPP strategies and programs

With Cooperative Agreement CE07-701, ISDH seeks to partner with organizations working towards the primary prevention of sexual violence on a state level. See Section 4a for detailed information about eligibility criteria.

## 2. Background and Program Guidance

### 2a. Prevention Concepts and Principals

The goal of the Rape Prevention and Education (RPE) program is to prevent sexual violence from initially occurring. The CDC defines primary prevention as: “Approaches and activities that take place before sexual violence has occurred to prevent initial perpetration or victimization”. RPE-funded program activities should be built around strategies that modify and/or eliminate the events, conditions, situations, or exposure to influences (risk factors) that result in the initiation and perpetration of sexual violence and associated consequences. Additionally, program activities should encompass efforts to address perpetration, victimization, and bystander attitudes and behaviors and seek to identify and enhance protective factors that impede the initiation of sexual violence in at-risk populations and the communities<sup>a</sup>. To prevent the initial occurrence of sexual violence, efforts are needed that stop first-time perpetration rather than relying solely on efforts that seek to prevent victimization.

The CDC has recently embraced a new focus for the Sexual Violence Prevention and Education Cooperative Agreement. Grantees must focus on the primary prevention of sexual violence in their planning and programming—preventing first-time perpetration and victimization. They must foster networks and coalitions comprised of key community stakeholders to partner on sexual violence primary prevention initiatives. A comprehensive primary prevention program is “...(a) combination of complementary and synergistic prevention strategies across the levels of the social ecology that address the needs of a universal or select population.” Additionally, “Strategies are complementary and synergistic when they focus on the same group and when a strategy implemented at one level of the social ecology reinforces a strategy at another level of the social ecology. The strategies at different levels of the social ecology address the same risk or protective factors”.<sup>b</sup>

► For more detailed information about how the CDC defines the primary prevention of sexual violence, review *Attachment A “Sexual Violence Prevention: Beginning the Dialogue.”*

Consistent with the CDC definition of primary prevention, ISDH expects grantees to formulate programs that include activities to change beliefs, attitudes, behaviors, and policies which support or allow sexual violence to occur, and to limit activities that emphasize the “precaution” side of prevention. For example, self-defense classes or

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<sup>a</sup> “Sexual Violence Prevention: Beginning the Dialogue” CDC, 2004.

<sup>b</sup> “Second Edition Guidance Document for the Sexual Violence Prevention and Education Cooperative Agreement CE-07-701 (Rape Prevention and Education)” March 2008, p 15.

activities to improve safety skills for women are precautionary activities as opposed to primary prevention activities because these activities do not address the root causes of sexual violence—i.e., the reasons that perpetration occurs. RPE-funded activities should be focused on strengthening and coordinating the individual, relationship, community, and societal factors that decrease the likelihood of perpetration and victimization.

The Prevention Concepts and Principals that should be integrated into program development are:

- Risk and Protective Factors
- The Social Ecological Model
- Universal and Selected Populations
- Before and After Prevention Concept
- Integration of Before and After Prevention Concept and the Social Ecological Model
- Principles of Effective Prevention Programs (Educational Sessions)
- Integration of the Comprehensive Prevention Principle and the Social Ecological Model

► Review *Attachment B*, “Third Edition: Guidance Document for the Sexual Violence Prevention and Education Cooperative Agreement” (pp 4-18) for detailed information on the key prevention concepts and principles. This information is invaluable in developing goals and objectives and determining program activities.

## 2b. Approved Activities for RPE Funding

For the purpose of this cooperative agreement, grantees should construct and implement programs to enhance the effectiveness of the federally legislatively approved activities to prevent first-time perpetration and victimization. They are as follows:

- Educational seminars
- Operation of hotlines
- Training programs for professionals
- Preparation of informational material
- Training programs for students and campus personnel designed to reduce the incidence of sexual assault at colleges and universities
- Education to increase the awareness about drugs used to facilitate rapes or sexual assault; and
- Other efforts to increase awareness of the facts about or to help prevent, sexual assault, including efforts to increase awareness in underserved communities and

awareness among individuals with disabilities as defined in Section 3 of the Americans with Disabilities Act of 1990 (42 U.S.C. Section 12102).

RPE grantees are expected to plan while continuing to implement and increase efforts to move along the prevention continuum from basic awareness activities to those strategies that change beliefs, attitudes, behaviors and policies that support or allow sexual violence to occur. Awareness activities are important to bring attention to the impact sexual violence has on individuals, families, communities, and society, but in and of themselves will not change beliefs, attitudes, behaviors and policies regarding sexual violence.

Additionally, the CDC has identified complimentary strategies that should be executed along with the legislatively approved activities:

- Coalition Building
- Community Mobilization
- Social Norms Change
- Public Policy/Organizational Practice Change

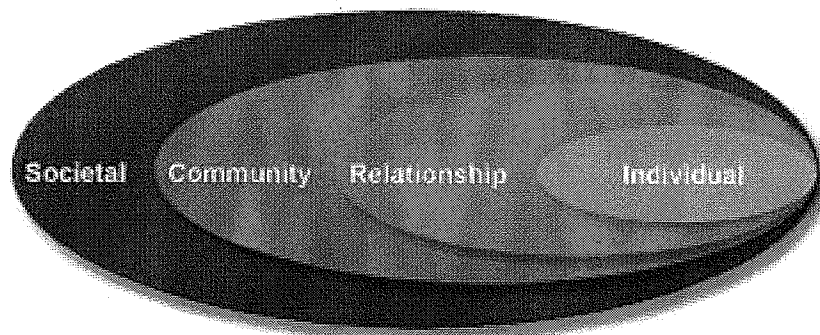
► Review *Attachment C*, “Draft Guidelines for Working with Youth, Families, and Communities for Sexual Violence Prevention” and *Attachment D*, “Draft Enhancing Activities for Primary Prevention of Sexual Violence” for specific guidance regarding program planning for legislatively approved activities and complimentary strategies.

## 2c. Applying the Social Ecological Model

CDC uses a four-level social-ecological model to better understand violence and the effect of potential prevention strategies<sup>c</sup>. This model considers the complex interplay between individual, relationship, community, and societal factors. It allows us to address the factors that put people at risk for experiencing or perpetrating violence.

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<sup>c</sup> Dahlberg LL, Krug EG. “Violence-a global public health problem”. In: Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, eds. *World Report on Violence and Health*. Geneva, Switzerland: World Health Organization; 2002:1-56.



### **Individual**

The first level identifies biological and personal history factors that increase the likelihood of becoming a victim or perpetrator of violence. Some of these factors are age, education, income, substance use, or history of abuse.

### **Relationship**

The second level includes factors that increase risk because of relationships with peers, intimate partners, and family members. A person's closest social circle—peers, partners and family members—influences behavior and contributes to their range of experience.

### **Community**

The third level explores the settings, such as schools, workplaces, and neighborhoods, in which social relationships occur and seeks to identify the characteristics of these settings that are associated with becoming victims or perpetrators of violence.

### **Societal**

The fourth level looks at the broad societal factors that help create a climate in which violence is encouraged or inhibited. These factors include social and cultural norms. Other large societal factors include the health, economic, educational and social policies that help to maintain economic or social inequalities between groups in society<sup>d</sup>.

A comprehensive approach to primary prevention includes working within multiple levels of the social ecological model. **Proposed RPE-funded prevention projects should include a continuum of strategies that address multiple levels of the social ecological model.** Activities should be developmentally appropriate and conducted across the lifespan. This approach is more likely to sustain prevention efforts over time than any single intervention.

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<sup>d</sup> [http://www.cdc.gov/ncipc/dvp/Social-Ecological-Model\\_DVP.htm](http://www.cdc.gov/ncipc/dvp/Social-Ecological-Model_DVP.htm)



The social ecological model encourages consideration of the entire context of a life experience when planning effective program strategies. Links between individual protective and risk factors for the perpetration and victimization of sexual violence are mediated by many other levels of social life.

► See *Attachment C*, page 1 “Use a comprehensive approach” for a detailed example of a primary prevention program working on all levels of the social ecological model.

## 2d. Coalitions and Collaboration

It is imperative that RPE-funded programs involve diverse state and community stakeholders in the planning, implementation, and evaluation of comprehensive SVPP programs. When considering which stakeholders to partner with, the lead entity should involve representatives that are impacted and have influence on individuals and relationships. Examples are young men and women, peer mentors, youth groups, parents, teachers, and counselors. Those who influence community and society, such as law enforcement agencies, the criminal justice system, healthcare agencies, employers and businesspeople, community and faith leaders, political figures and policymakers, must also be included. Garnering the support of people who work at all levels of the social ecological model is essential to the success of a primary prevention program. All proposed projects must address multiple levels of the social ecological model.

All RPE-funded projects must demonstrate: a) an existing coalition between diverse community organizations to address SVPP **OR** b) the intent and the ability to form such a coalition throughout the course of the grant cycle. The plan must include names and affiliations of key organizations that will be involved in the community effort, including letters of support from at least three (3) of the collaborative organizations. "A coalition is a group of individuals and/or organizations that come together with a common interest and agree to work together for a common goal. Coalitions are the cornerstones of creating successful change within a community. A well-organized, broad-based coalition can be more successful than a single agency in creating policy change, increasing public knowledge, and developing innovative solutions to complex problems."<sup>e</sup>

► See *Attachment E* "Guidelines for Coalition Building for Sexual Violence Prevention" for tips and suggestions on community collaboration.

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<sup>e</sup> Draft "Guidelines for Coalition Building for Sexual Violence Prevention", pp 5-6, CDC.

## 2e. Spectrum of Prevention

A CDC-recommended tool called “The Spectrum of Prevention” can assist communities in developing sexual violence primary prevention programs. The Spectrum outlines six levels of prevention strategies<sup>f</sup>:

Level of Spectrum	Definition of Level
1. Strengthening Individual Knowledge and Skills	Enhancing an individual's capability of preventing injury or illness and promoting safety
2. Promoting Community Education	Reaching groups of people with information and resources to promote health and safety
3. Educating Providers	Informing providers who will transmit skills and knowledge to others
4. Fostering Coalitions and Networks	Bringing together groups and individuals for broader goals and greater impact
5. Changing Organizational Practices	Adopting regulations and shaping norms to improve health and safety
6. Influencing Policy and Legislation	Developing strategies to change laws and policies to influence outcomes

Proposed RPE-funded projects must address at least one and preferably more levels of the spectrum through a full continuum of strategies designed to prevent sexual violence from initially occurring.

► See *Attachment F*, “Sexual Violence and the Spectrum of Prevention” for examples of strategies and activities that have been employed at different levels of the Spectrum of Prevention in communities around the United States.

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<sup>f</sup> [http://www.preventioninstitute.org/pdf/spectrum\\_injury.pdf](http://www.preventioninstitute.org/pdf/spectrum_injury.pdf)

### 3. Indiana Rape Prevention and Education Program Goals

RPE-funded project proposals should conduct activities that contribute to the achievement of one or more of the following goals. The “Suggested Program Activities” are simply provided to give an example of the types of activities that might help to achieve each goal. Please note the approximate amount of the Indiana RPE funding that will be available for programs addressing each goal, and prepare your requests accordingly. The amounts allocated for each program goal represent STATEWIDE funding available to be dedicated to each goal. When determining the amount of funding to request for your proposed project, consider your capacity and capability to achieve the full extent of the goal. **All RPE-funded proposed projects must address one or more of the goals listed below. Objectives and program activities should be written and planned in accordance with these goals.**

Program Goal	Suggested Program Activities
<p>1) To support all aspects of a competitive process to allocate funds to community-level sexual violence primary prevention programs and to oversee all administrative, fiscal, technical assistance and programmatic aspects of these funded community programs*.  <i>(Up to \$410,000 will be available to support this goal).</i></p> <p><i>*Upon notification of award, ISDH will work with the organization selected to fulfill this goal to make community program funding decisions.</i></p>	<p>Management of competitive selection process for funding comprehensive community sexual violence primary prevention programs. Overseeing administration and fiscal functions and serving the technical assistance and programmatic needs of these funded community programs.</p>
<p>2) To provide culturally relevant SVPP programming to diverse underserved, underrepresented, minority, and disabled populations in Indiana.  <i>(Up to \$125,000 will be available to support this goal).</i></p>	<p>Culturally relevant multi-session educational programs, focus groups to assess risk and protective factors unique to a specific population, male involvement, development of educational materials, and skill development of healthy and respectful relationships aimed at a specific underrepresented/underserved subset of the population.</p>

<p>3) To conduct a statewide social marketing campaign around the primary prevention of sexual violence. <i>(Up to \$60,000 will be available to support this goal).</i></p>	<p>Statewide campaign using multiple social marketing avenues (PSAs, TV spots, engagement of high-profile representatives, social networking, posters and brochures, etc). to provide sexual violence primary prevention messaging to diverse populations, including males.</p>
<p>4) To increase the capacity of Indiana colleges and universities to prevent initial occurrence of sexual violence through training and technical assistance, campus coalition building, and mini-grants. <i>(Up to \$115,000 will be available to support this goal).</i></p>	<p>Men of Strength clubs, review of university anti-sexual violence policies, skill development for bystander intervention, educational sessions and focus groups for sports teams and fraternities, education about date rape drugs.</p>
<p>5) To train multidisciplinary professionals who have a clear role in sexual violence prevention and who are willing and prepared to incorporate sexual violence primary prevention into their work. <i>(Up to \$70,000 will be available to support this goal).</i></p>	<p>SVPP multi-session training and provision of resources to teachers, medical professionals, law enforcement, prosecutors, social service workers, government officials, men, and businesses.</p>

## 4. Technical Matters

### 4a. Eligibility

All public or private organizations, agencies, and academic institutions are eligible to apply. Applicants must demonstrate a clear understanding of the dynamics of sexual violence, the principles of prevention, and the importance of involving multiple stakeholders in a comprehensive program. Grants will be awarded to applicants who demonstrate the capability of providing the proposed services and the commitment to participate in the statewide primary prevention of sexual violence planning process. Partnerships among applicants from the same geographic area are strongly encouraged. The lead entity **MUST BE IN A POSITION TO OPERATE ON A COST-REIMBURSEMENT BASIS, accept electronic funds transfer (EFT), and become an Indiana registered vendor prior to billing for services if the applicant is a for-profit entity. If you are unsure about eligibility, be sure to complete a letter of intent (see Section 4e) and you will be notified if your agency/organization is ineligible. Individuals not operating within an established organization, agency, business, or other entity are not eligible to apply for this grant opportunity.**

### 4b. Amount Available

Approximately \$780,000 is expected to be available between November 2009 and October 2010 to fund three to five projects in Indiana under this Request for Proposals. **This amount is an estimate given the current fiscal year's funding level and is subject to change based on an increase or decrease of funding from the CDC.** This funding is available for one year. After one year, a new Request For Proposals will be issued. All awards and disbursement of funds under this Request for Proposals are contingent on availability of funds to the Indiana State Department of Health and the discretion of the agency. ISDH reserves the right to re-allocate funds to established priority areas at their discretion of any un-awarded funds that may be unobligated and returned by the award recipient(s) under this RFP. ISDH reserves the right to reject and to partially fund any proposal.

### 4c. Contract Period

Upon notification of award, a contract will be created between ISDH and each funded agency. The contract period will begin on November 1, 2009 and end on October 31, 2010. No reimbursement will be provided for any services rendered before November 1, 2009 or after October 31, 2010. Based on continuing funding from CDC, an annual RFP will be issued to current and prospective applicants.

#### 4d. Budget

See budget section guidance (Section V) on how to prepare the budget. The format for the budget is provided by the CDC. The budget should accurately reflect the scope of the proposed project. All funded projects will be expected to send a representative to Indianapolis for a training seminar (two days and one night). Include travel, per diem, and accommodation costs, if applicable, for this training seminar in the budget.

#### 4e. Letter of Intent

Applicants are encouraged to submit a letter of intent to the Indiana State Department of Health indicating an intention to apply for this grant opportunity. A letter of intent is NOT required, and failing to submit a letter of intent does not preclude any entity from applying for this grant opportunity. Similarly, the submission of a letter of intent does not obligate the applicant to actually apply for this grant opportunity. The letter of intent is intended only to serve as tool for ISDH to assess who may be applying. If you choose to complete a letter of intent, please limit it to one page, print it on letterhead and mail by May 1, 2009 to:

Abigail Kelly-Smith  
Office of Women's Health  
Indiana State Department of Health  
2 N. Meridian St.  
Section 5M  
Indianapolis, IN 46204

#### 4f. Format

This application must be double-spaced, printed on one side only, on 8 1/2" x 11" paper, with 1" margins, using standard black type (no smaller than 12--point) that can be photocopied. All pages and forms must be numbered sequentially on the bottom right hand corner of the page and include the applicant entity's name (Example—3: Indiana State Department of Health). Please identify and begin each section on a new page. Do not staple the application. Do not include photographs, oversized documents, video or audiotapes, or materials that cannot be photocopied. The application must not exceed thirty (30) pages. Documents included as attachments (forms, organizational charts, letters of support, resumes, etc) will not count against the limit of thirty pages.

#### 4g. Application Submission

Applications must be postmarked by **Monday, June 1, 2009**. **Electronic submissions will not be considered.** Please submit an original and three copies of your entire proposal, including attachments, to:

Abigail Kelly-Smith  
Office of Women's Health  
Indiana State Department of Health  
2 N. Meridian St.  
Section 5M  
Indianapolis, IN 46204

#### 4h. Grant Application Conference Calls

Two optional grant application technical assistance conference calls will be offered on Thursday, May 7, 2009 from 10:00-11:30 am AND Monday, May 11, 2009 from 2:00-3:30 pm by the Indiana State Department of Health. The calls will cover the basic prevention principles, utilizing the social ecological model in SVPP, and writing realistic goals and objectives. There will also be ample time for questions. Interested applicants only need to attend one of the scheduled calls as they will cover the same information. Contact Abby Kelly-Smith at [akelly-smith@isdh.IN.gov](mailto:akelly-smith@isdh.IN.gov) for to RSVP for a call and to obtain call-in information.

#### 4i. Inquiries Regarding Technical Assistance

Applicants are strongly encouraged to ask questions regarding technical assistance on the conference calls. If you are not able to be on either of the conference calls, you may email your questions to:

Abigail Kelly-Smith  
OWH Program Assistant  
Rape Prevention and Education Program Director  
E-mail: [akelly-smith@isdh.IN.gov](mailto:akelly-smith@isdh.IN.gov)

Please be aware that the main opportunity to ask questions will be on the scheduled grant application conference calls.

#### 4j. Timeline

Request for Proposals Issued: April 17, 2009



Letter of Intent Due Date (optional): May 1, 2009

Optional Grant Application Technical Assistance Conference Calls: May 7 and May 11, 2009

Application Due Date: June 1, 2009

ISDH Review of Applications: June 1-20, 2009

Notifications of Award: June 22-26, 2009

Contract Development: July 2009

Contract Start Date: November 1, 2009

Contract End Date: October 31, 2010

## **5. FY 2009 Indiana Rape Prevention and Education Application Guidance**

Proposed Rape Prevention and Education (RPE) funded projects must adhere to the requirements set forth by the Indiana State Department of Health (ISDH). Proposals that do not conform to the following outline will be considered incomplete and will not be eligible for funding.

### **I. Applicant Information Form (Form A)**

### **II. Cover Letter**

### **III. Project Narrative**

- a. Abstract
- b. Problem Statement
- c. Target Population for Proposed Project
- d. Work Plan for the Proposed Project—Narrative Form
- e. Work Plan for the Proposed Project—Chart Form **(Form B)**

### **IV. Project Evaluation Plan**

### **V. Budget**

- a. Summary
- b. Narrative

### **VI. Organizational Capacity**

- a. Mission, guiding principles, focus of services and programs
- b. Management Structure
- c. Community Collaboration Plan
- d. Job Descriptions and Resumes of Key Personnel

### **VII. Attachments**

## I. Applicant Information Form

Complete the Applicant Information Form (Form A).

## II. Cover Letter

Include a cover letter, no more than one page, which summarizes the intention of the proposed project. The cover letter should be on letterhead and signed by the applicant entity's executive director as well as the person authorized to make legal and contractual agreements for the applicant entity.

## III. Project Narrative

- a. **Abstract:** The abstract should serve as the executive summary of the proposed project. The abstract should clearly describe the overall proposed project and be no longer than one page.
- b. **Problem Statement:** Describe the problem that prompts the applicant to propose the project. Provide available data regarding the nature and extent of the identified problem. Include demographical information about the service area. For data on sexual violence, contact any of the following: law enforcement agencies, prosecutors' offices, local family and social service agencies, hospitals, and/or sexual violence service providers. Accurate data on sexual violence is difficult to obtain; do the best you can. Use local data whenever possible; however, if local data is not available, cite state or national data.
- c. **Target population:** Indicate the target population(s) that your project will serve (i.e. youth, adults, college-aged students, professionals, specific minority and underserved populations, etc). Describe the target community, including its location, population, and geographic nature (i.e. rural, urban, or combination) and any other relevant demographic or geographic information.
- d. **Work Plan:** This section is a detailed description of what the applicant proposes to do and to achieve with the funded project. Applicants should state which of the five goals listed in Section 3 of the guidance their proposed objectives and activities will help to achieve. One or more objectives should be created for each goal chosen. A simple tool used to create objectives is called SMART. Objectives should be Specific, Measurable, Achievable, Realistic, and should state a Timeframe. There are three different kinds of objectives: process objectives, impact objectives, and outcome objectives. Process objectives set specific numbers/types of activities to be completed by specific dates. Process objectives tell what you are doing and how you will do it. They describe participants, interactions and activities. Impact objectives tell how you will change attitudes, knowledge, or behavior in the short term and describe the degree to which you expect this change. Outcome objectives tell what the long-

term implications of your program will be by describing the expected outcome for the target population. Specify if your stated objectives are process objectives, impact objectives, or outcome objectives. Because the achievement of outcome objectives is often difficult to attribute to any one program in a short time period, it is recommended that for this grant opportunity applicants focus on process and impact objectives. **This section must be completed both in narrative form and in Form B. To complete this section in narrative form, list each goal to be addressed and each goal's objective(s). Then, describe the key strategies that will be used to accomplish the objective(s). Next, include a detailed description of the activities that will take place to form the selected strategies. Be sure to include a timeframe for the activities, a staff person responsible, and a target completion date.**

- e. Use the **Form B** template to repeat the same information given in Section III-d in the form of a chart. Use a separate template for each objective stated and include all forms as attachments to the narrative.

Samples of goals and objectives statements: Please see below for examples of well-written goals and objectives statements.

*Indiana RPE Goal: To conduct a statewide social marketing campaign around the primary prevention of sexual violence.*

*Sample process objective: By April 2010, three (3) different PSAs targeting three different populations will have been developed, piloted, and disseminated statewide.*

*Sample impact objective: By June 2010, the components of the media campaign will have been piloted in focus groups and 75% of participants will report that the materials convey effective messaging around male involvement in the prevention of sexual violence.*

#### IV. Project Evaluation Plan

ISDH is committed to funding agencies whose goals are to change the knowledge, attitudes, beliefs, and behaviors that support sexual violence. In order to assess the progress and success of the overall RPE project in Indiana, as well as individual funded projects, both process and impact evaluations are required. Job descriptions should reflect an appropriate percentage of staff time to be devoted to program evaluation.

Applicants should state **EACH** proposed program objective and clearly and succinctly describe the strategies that will be used to evaluate whether the objective is being met. For each objective, indicate a staff person responsible for tracking the progress of the objective. Process objectives are typically evaluated by adherence to projected timetables, production, distribution, and utilization of products, records of the number of individuals reached with a particular intervention, and other similar measures that evaluate the progress of activities. Impact objectives are typically evaluated by utilizing tools such as pre- and post-tests and focus groups that measure a change in beliefs and behaviors, surveys that measure changes in knowledge, intentions, or actions, and/or key informant interviews. Outcome objectives are generally evaluated by data on occurrence, magnitude, and prevalence of the given problem. Since accurate data on sexual violence is difficult to obtain, and outcome objectives rely on data and long-term timeframes to be achieved, for the purpose of this project, it is best to place emphasis is on process and impact objectives. If the proposed project will allow for quantitative data collection, outcome objectives may be included.

Reporting requirements will be outlined upon notification of award.

## V. Budget

All funds budgeted for the proposed project must be supported by the project narrative. Complete the budget justification narrative using the format starting on page 23.

Allowable expense categories are:

- Salaries and wages
- Fringe benefits
- Consultant costs/fees
- Equipment (limit equipment costs)
- Supplies
- Travel
- Other
- Contractual Costs

Food may not be purchased with this money, except for per diem expenses for staff.

**Please note that travel, mileage reimbursement and per diem rates must be the same as state rates. Mileage is currently reimbursed at \$0.44/mile and per diem currently is \$26/day for in-state travel and \$32/day for out-of-state travel.** Funded projects will be notified of any change in state reimbursement rates.

Be sure to include any donations or in-kind services that will be used for this project in the budget justification narrative.

- a. **Budget Summary**—Indicate the subtotals of funding requested in each of the following categories: Salaries and wages, Fringe benefits, Consultant costs/fees, Equipment (limit equipment costs), Supplies, Travel, Other, and Contractual Costs, as well as the total funding requested.
- b. **Budget Justification Narrative**—Complete the budget justification narrative in accordance with the CDC format given on the next eight pages of the guidance.

## Budget Justification Narrative Guidance

### INTRODUCTION

Guidance is offered for the preparation of a budget request. Following this guidance will facilitate the review and approval of a requested budget by insuring that the required or needed information is provided.

#### A. Salaries and Wages

For each requested position, provide the following information: name of staff member occupying the position, if available; annual salary; percentage of time budgeted for this program; total months of salary budgeted; and total salary requested. Also, provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives.

##### *Sample budget*

Personnel				Total \$_____
Position Title and Name	Annual	Time	Months	Amount Requested
Project Coordinator Susan Taylor	\$45,000	100%	12 months	\$45,000
Finance Administrator John Johnson	\$28,500	50%	12 months	\$14,250
Outreach Supervisor (Vacant*)	\$27,000	100%	12 months	\$27,000

##### *Sample Justification*

The format may vary, but the description of responsibilities should be directly related to specific program objectives.

##### Job Description: Project Coordinator - (Name)

This position directs the overall operation of the project; responsible for overseeing the implementation of project activities, coordination with other agencies, development of materials, provisions of in service and training, conducting meetings; designs and directs the gathering, tabulating and interpreting of required data, responsible for overall program evaluation and for staff performance evaluation; and is the responsible authority for ensuring necessary reports/documentation are submitted to CDC. This position relates to all program objectives.

**B. Fringe Benefits**

Fringe benefits are usually applicable to direct salaries and wages. Provide information on the rate of fringe benefits used and the basis for their calculation. If a fringe benefit rate is not used, itemize how the fringe benefit amount is computed.

**Sample Budget**

*Fringe Benefits*

*Total \$ \_\_\_\_\_*

*25% of Total salaries = Fringe Benefits*

*If fringe benefits are not computed by using a percentage of salaries, itemize how the amount is determined.*

*Example: Project Coordinator Salary \$45,000*

<i>Retirement 5% of \$45,000</i>	<i>=</i>	<i>\$2,250</i>
<i>FICA 7.65% of \$45,000</i>	<i>=</i>	<i>3,443</i>
<i>Insurance</i>	<i>=</i>	<i>2,000</i>
<i>Workers= Compensation</i>	<i>=</i>	<i>_____</i>

*Total:*

**C. Consultant Costs**

This category is appropriate when hiring an individual to give professional advice or services (e.g., training, expert consultant, etc.) for a fee but not as an employee of the grantee organization. Written approval must be obtained from CDC prior to establishing a written agreement for consultant services. Approval to initiate program activities through the services of a consultant requires submission of the following information to CDC (**see Budget Appendix A**):

1. Name of Consultant;
2. Organizational Affiliation (if applicable);
3. Nature of Services To Be Rendered;
4. Relevance of Service to the Project;
5. The Number of Days of Consultation (basis for fee); and
6. The Expected Rate of Compensation (travel, per diem, other related expenses) list a subtotal for each consultant in this category.

If the above information is unknown for any consultant at the time the application is submitted, the information may be submitted at a later date as a revision to the budget. In the body of the budget request, a summary should be provided of the proposed consultants and amounts for each.



#### D. Equipment

Provide justification for the use of each item and relate it to specific program objectives. Maintenance or rental fees for equipment should be shown in the Other category.

##### **Sample Budget**

Equipment

Total \$ \_\_\_\_\_

<u>Item Requested</u>	<u>How Many</u>	<u>Unit Cost</u>	<u>Amount</u>
Computer Workstation (specify type)	2 ea.	\$5,500	\$11,000
Computer (specify type)	1 ea.	6,000	6000
Total			\$17,000

##### **Sample Justification**

Provide complete justification for all requested equipment, including a description of how it will be used in the program.

**Note: Due to limited RPE funding, equipment costs should be minimal for the proposed project.**

#### E. Supplies

Individually list each item requested. Show the unit cost of each item, number needed, and total amount. Provide justification for each item and relate it to specific program objectives. If appropriate, General Office Supplies may be shown by an estimated amount per month times the number of months in the budget category.

##### **Sample Budget**

Supplies

Total \$ \_\_\_\_\_

General office supplies (pens, pencils, paper, etc.)

12 months x \$240/year x 10 staff = \$2,400

Educational Pamphlets (3,000 copies @) \$1 each = \$3,000

Educational Videos (10 copies @ \$150 each) = \$1,500

Word Processing Software (@ \$400 specify type) = \$ 400

### **Sample Justification**

*Provide complete justification for all requested supplies, including a description of how it will be used in the program. General office supplies will be used by staff members to carry out daily activities of the program. The education pamphlets and videos will be purchased from XXX and used to illustrate and promote safe and healthy activities. Word Processing Software will be used to document program activities, process progress reports, etc.*

## **F. Travel**

Dollars requested in the travel category should be for **staff travel only**. Travel for consultants should be shown in the consultant category. Travel for other participants, advisory committees, review panel, etc. should be itemized in the same way specified below and placed in the **Other** category.

**In-State Travel** Provide a narrative justification describing the travel staff members will perform. List where travel will be undertaken, number of trips planned, who will be making the trip, and approximate dates. If mileage is to be paid, provide the number of miles and the cost per mile. If travel is by air, provide the estimated cost of airfare. If per diem/lodging is to be paid, indicate the number of days and amount of daily per diem as well as the number of nights and estimated cost of lodging. Include the cost of ground transportation when applicable.

**Out-of-State Travel** Provide a narrative justification describing the same information requested above. Include CDC meetings, conferences, workshops, if required by CDC. Itemize out-of-state travel in the format described above.

### **Sample Budget**

Travel (in-State and out-of-State)

Total \$ \_\_\_\_\_

**In-State Travel:**

1 trip x 2 people x 500 miles r/t x .40/mile	=	\$ 400
2 days per diem x \$26/day x 2 people	=	\$104
1 nights lodging x \$79/night x 2 people	=	\$158
25 trips x 1 person x 300 miles avg. x .40/mile	=	\$3000
Total		\$ 3,662

### **Sample Justification**

The Project Coordinator and the Outreach Supervisor will travel to (location) to attend AIDS conference. The Project Coordinator will make an estimated 25 trips to local outreach sites to monitor program implementation.

### Sample Budget

#### Out-of-State Travel:

1 trip x 1 person x \$500 r/t airfare = \$500

3 days per diem x \$32/day x 1 person = \$96

1 night=s lodging x \$88/night x 1 person = \$88

Ground transportation 1 person = \$50

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Total \$734

### Sample Justification

The Project Coordinator will travel to CDC, in Atlanta, GA, to attend the CDC Conference.

## G. Other

This category contains items not included in the previous budget categories. Individually list each item requested and provide appropriate justification related to the program objectives.

### Sample Budget

Other

Total \$\_\_\_\_\_

#### Telephone

(\$ \_\_\_ per month x \_\_\_ months x #staff) = \$ Subtotal

#### Postage

(\$ \_\_\_ per month x \_\_\_ months x #staff) = \$ Subtotal

#### Printing

(\$ \_\_\_ per x \_\_\_ documents) = \$ Subtotal

Equipment Rental (describe)

(\$ \_\_\_ per month x \_\_\_ months) = \$ Subtotal

Internet Provider Service

(\$ \_\_\_ per month x \_\_\_ months) = \$ Subtotal

**Sample Justification**

*Some items are self-explanatory (telephone, postage, rent) unless the unit rate or total amount requested is excessive. If not, include additional justification. For printing costs, identify the types and number of copies of documents to be printed (e.g., procedure manuals, annual reports, materials for media campaign).*

**H. Contractual Costs**

1. Name of Contractor;
2. Method of Selection;
3. Period of Performance;
4. Scope of Work;
5. Method of Accountability; and
6. Itemized Budget and Justification.

Contract Total:

**Total Project Cost**    \$ \_\_\_\_\_

## **Appendix A:**

### ***Required Information for Consultant Approval***

This category is appropriate when hiring an individual who gives professional advice or provides services for a fee and who is not an employee of the grantee organization. All consultants require prior approval from CDC annually. Submit the following required information for consultants:

1. **Name of Consultant:** Identify the name of the consultant and describe his or her qualifications.
2. **Organizational Affiliation:** Identify the organization affiliation of the consultant, if applicable.
3. **Nature of Services To Be Rendered:** Describe in outcome terms the consultation to be provided including the specific tasks to be completed and specific deliverables. A copy of the actual consultant agreement should not be sent to CDC.
4. **Relevance of Service to the Project:** Describe how the consultant services relate to the accomplishment of specific program objectives.
5. **Number of Days of Consultation:** Specify the total number of days of consultation.
6. **Expected Rate of Compensation:** Specify the rate of compensation for the consultant (e.g., rate per hour, rate per day). Include a budget showing other costs such as travel, per diem, and supplies.
7. **Method of Accountability:** Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant agreement.

## Appendix B:

### ***Required Information for Contract Approval***

1. Name of Contractor: Who is the contractor? Identify the name of the proposed contractor and indicate whether the contract is with an institution or organization.
2. Method of Selection: How was the contractor selected? State whether the contract is sole source or competitive bid. If an organization is the sole source for the contract, include an explanation as to why this institution is the only one able to perform contract services.
3. Period of Performance: How long is the contract period? Specify the beginning and ending dates of the contract.
4. Scope of Work: What will the contractor do? Describe in outcome terms, the specific services/tasks to be performed by the contractor as related to the accomplishment of program objectives. Deliverables should be clearly defined.
5. Method of Accountability: How will the contractor be monitored? Describe how the progress and performance of the contractor will be monitored during and on close of the contract period. Identify who will be responsible for supervising the contract.
6. Itemized Budget and Justification: Provide an itemized budget with appropriate justification. If applicable, include any indirect cost paid under the contract and the indirect cost rate used.

## VI. Organizational Capacity

This section should illustrate the applicant organization's capacity and its ability to provide SVPP services to its target population and carry out the implementation of the project. Include the requested information in the following format:

- a. **Applicant Agency Background Information:** Provide a brief description of the applicant agency including the mission and vision and an overview of key services and programs. Demonstrate how SVPP is closely aligned with other services and programs the agency provides.
- b. **Management Structure:** Applicants should outline the management structure and organizational capability for program implementation. Attach an organizational chart with names and titles.
- c. **Community Collaboration Plan:** Identify and describe the role of any collaborative organization or combined efforts with other agencies necessary to the execution of the project. Address how the project will involve diverse community stakeholders. In addition, attach a minimum of three (3) letters of support from collaborative partners.
- d. **Job Descriptions and Resumes of Key Personnel:** Attach a job description for key staff that will be involved with this project as well as resumes if specific individuals have already been identified.

## VII. Attachments

Label all attachments as referenced in the narrative and attach at the end of the proposal.